M E M O R A N D U M

June 23, 2020

TO: Health and Human Services Committee

FROM: Linda McMillan, Senior Legislative Analyst

SUBJECT: (1) Overview of Findings from COG 2020 Point-in-Time Survey; (2) Moving
            People to Permanent Housing during the COVID-19 Health Emergency (update
            on COVID-19 assistance); (3) Proposal from Bethesda Cares for Veteran and
            Vulnerable Unsheltered Single Adults; (4) Recovery Framework: (a) Homeless
            Crisis Response and (b) Eviction and Homelessness Prevention.

Expected for this session:
Amanda Harris, Chief, Services to End and Prevent Homelessness, Department of Health and
Human Services
Frank Demarais, Deputy Director, Department of Housing and Community Affairs
John Mendez, Executive Director, Bethesda Cares

Council of Governments Point-in-Time Survey

      Each year, the Council of Governments conducts a Point-in-Time Survey that counts all
people who can be found and identified as homeless over the day of the survey. Because it is an
enumeration and survey that occurs on one-day, it can be impacted by weather and other factors.
In 2020, the Point-in-Time occurred on January 22, 2020; prior to the COVID-19 health
emergency.

      The Executive Summary from the regional report is attached at © 1-4 and the section on
Montgomery County's Continuum of Care is attached at © 5-14. The following is a link to the
full report:

https://www.mwcog.org/file.aspx?D=VhQ%2bN3a3J9SwIuD5HUlcTubx60XB9%2fCCYa%2fe2a1tXfY%3d
&A=e4vI6kl7inBrEJL%2fp3YmQX0n1j%2bcfnm2DOc398G3mvA%3d

The following table summarizes some of the data for Montgomery County and the change in trends from 2016 to 2020.

Montgomery County	2016	2017	2018	2019	2020	Change in Persons 16-20	% Change in Persons 16-20
On PIT Day:							
Literally Homeless Persons	981	894	840	647	670	-311	-31.7%
Literally Homeless Persons in Families	358	278	272	206	183	-175	-48.9%
Chronically Homeless Single Adults	145	158	124	11	10	-135	-93.1%
Homeless Veterans	17	14	18	13	14	-3	-17.6%

Additional Data for a Year	2016	2017	2018	2019	2020	Change in Persons 16-20	% Change in Persons 16-20
People in Families Experiencing Homelessness for the FIRST Time	678	801	776	449	416	-262	-38.6%
Length of Stay in Emergency Shelter	50	48	47	55	54	4	8.0%
Households returning to the homeless system after 24 months	18	29	12	13	12	-6	-33.3%

The Montgomery County section of the report also includes data about characteristics of certain subpopulations. Reductions are shown in all but the subpopulation for chronic substance abuse and people living with HIV/AIDS. Declines are both from the overall reduction in the homeless population but also the coordinated entry system that prioritizes housing placement for persons with the highest acuity/vulnerability.

SUBPOPULATIONS for Adults Only in All Households	FY18	FY19	FY20	% Change FY18-20
Chronic Substance Abuse	66	28	71	7.6%
Severe Mental Illness	170	126	123	-27.6%
Dual Diagnosis (Substance Abuse and Mental Illness)	97	73	0	-100.0%
Chronic Health Problem	144	84	26	-81.9%
Living with HIV/AIDS	6	2	15	150.0%
Physical Disability	110	136	61	-44.5%
Domestic Violence Victim History	147	106	35	-76.2%
Limited English	63	32	11	-82.5%
U.S. Veteran	13	13	12	-7.7%
Chronically Homeless	124	11	10	-91.9%

Moving People to Permanent Housing in COVID-19

The County's Strategic Plan on homelessness is to make it rare, brief, and one-time only. This work does not take a break during this pandemic.[1] In fact, it is more critical than ever to move both unsheltered and sheltered people experiencing homelessness into safe and stable housing because of the evidence that housing is healthcare. In addition, Black and African Americans are the highest percentage of people who have entered the homeless system since March (73% of 63), and they are disproportionately impacted by COVID-19. The Continuum of Care is continuing to set goals for housing people and move people into housing.

Ms. Harris will provide the Committee with an update on the current number of individuals and adults needing placement. The May 2020 Housing for All report showed that in the month of May, 13 families were moved into permanent housing: 7 through Rapid Re-Housing, 1 through Permanent Supportive Housing, and another 5 through on-county programs. Twenty (20) vulnerable individuals were moved into housing in May, and there were six (6) more that had been accepted by a housing provider but were awaiting a move-in. In addition, there were two (2) Veterans housed and seven (7) more that were accepted by a housing provider but pending a move-in.

One of the impacts of the current pandemic is on Rapid Re-Housing, which provides a temporary subsidy while households increase their income. This is one of the most appropriate ways to resolve housing for families, but given the current employment market, households may need supports for a longer time, with the current average being 10 months. The program is flexible enough to do this, but as households stay on longer, it will impact the number of new households that can enter the program.

The Committee will also receive an update on the uses of the $2 million that was provided and spent for rent support and housing stabilization within DHHS Services to End and Prevent Homelessness and information on the types of situations that people were facing. (This is separate from additional Community Development Block Grant funding that was provided to the Housing Opportunities Commission via the Department of Housing and Community Affairs. This funding has certain federal guidelines and is currently being distributed.)

The letter sent to the County Executive in April as the $2 million was being approved requested changes to eligibility and certain requirements in response to the crisis which was implemented (© 15-17). At the time, the Council requested a separate multi-lingual hotline; however, MC311 has been the entry point for referrals both for this assistance program and the emergency financial assistance (EARP). The Government Operations and Fiscal Policy Committee recently had a joint session with the HHS Committee to discuss surge capacity for MC311 and the continued need for more multi-lingual capacity. Entry and referral through MC311 is easier to communicate than multiple numbers, but appropriate response and referral is needed for good outcomes.

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[1] ICH Strategic Plan:
https://www.montgomerycountymd.gov/Homelessness/Resources/Files/Documents/MCStrategicPlanFinalJan2020.pdf

The letter also discusses the need for private investment and partnerships with landlords for after eviction protections are lifted. The Committee can review this part of the request in its discussion of the recovery framework, later in this memo.

Lastly, the Executive transmitted amendments to the Rental Assistance Program[2] (a separate program and subsidy, not the emergency assistance that the $2 million addresses) and it is scheduled for public hearing on July 7th.

Proposal from Bethesda Cares – Housing Veterans and Vulnerable Unsheltered Adults

Moving people into permanent housing only happens in partnership with the organizations that are part of the Continuum of Care. Bethesda Cares, a partner in homeless outreach, permanent supportive housing, eviction prevention, and support services, has come forward with a proposal that would combine additional County funds with private donations to house homeless veterans and unsheltered individuals. A critical component of this proposal is that Bethesda Cares will master lease a small number of apartments so that they will be available when an unsheltered person is ready and willing to accept housing. The immediate availability of housing is critical for some vulnerable unsheltered homeless people who are not able or willing to seek services through the emergency shelter system. Such an effort, requires an organization to be willing to take on the responsibility of a lease, hold the unit, and then house the person until they are able to enter into a lease in their own name.

The total cost of the proposal that would eventually house 14 people is about $513,000. Of this total, Bethesda Cares will provide $158,200 and the County would need to fund about $355,000. Not all the individuals housed will need to enter through a master-leased unit, but 14 permanent supportive housing subsidies from the County are required to keep people housed.

Bethesda Cares, as one of the County's homeless outreach providers, interacts daily with homeless people in the Bethesda and Silver Spring areas; people who may only accept housing after a lot of interaction and trust building. However, referral to this program will be made through the Coordinated Entry System so the most vulnerable people from any area in the County will be able to be housed.

Bethesda Cares support through its private donors will include:

Rent/landlord master leasing support	$20,000
Grocery delivery twice per month w/BethesdaHELP volunteer corp	$10,000
Furniture move-in kits	$17,500
Recreational therapy and community integration	$ 7,000
Daily hot lunch on-site at Bethesda Cares	$15,700
Critical time case management	$19,000

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[2] https://apps.montgomerycountymd.gov/ccllims/DownloadFilePage?FileName=2664_1_10708_Bill_25-2020_Introduction_20200616.pdf

Finance/accounting support for rent processing/bill payment $24,000
Prevention resources for program and formerly homeless clients $35,000
HIPAA compliant virtual care in partnership from Kaiser Permanente $10,000

Mr. Mendez and a representative of his board will be available to discuss this proposal. There is no question that this continues the goals to house the most vulnerable individuals, continue to meet functional zero for Veterans and the chronically homeless, and clearly follows a Housing First model. It provides an opportunity to see if the master lease model is successful in getting unsheltered persons into permanent, stable, healthy housing, who would not otherwise access the program.

If the HHS Committee recommends moving forward with this proposal, Council staff will work with Executive staff to see what sources of funds would need to be used in the current year and future years for the County portion of the funding and can prepare any special appropriation that may be needed.

Recovery Framework: Homeless Crisis Response and Eviction & Homeless Prevention

The Executive has structured a recovery team effort to look at the short, intermediate, and long-term needs for the County as it continues to re-open and recover from the COVID-19 health crisis.

The stated vision for recovery is to become a more resilient government and community. The County's recovery effort, in the midst of a global pandemic, will include a community-wide approach for all individuals to thrive and will serve as a national model. The model includes:

Racial Equity: Provide the appropriate level of support to individuals so that there is fair access to quality services and resources.
Inclusion: Focus on initiatives that make Montgomery County a place where all people can recover and rebuild regardless of race, ethnicity, age, or economic circumstances.
Innovation: Harness advancements that sustain a continuation of all County and related services and resources to our community.
Sustainability: Use this opportunity to modernize County services and deploy resources efficiently and responsively.

There are two teams with a focus on homelessness. The first includes the critical issue of how to have healthy environment for people who **are** homeless while they are in shelter and continuing to focus on moving people into permanent, stable housing. The second group is focused on preventing evictions for people who are currently housed but have not been able to pay all or any of their rent because of the health and economic crisis. It is important to keep in mind for this second group that, pre-COVID, most eviction filings did not result in actual put-outs or households entering the homeless system and there may be significant options for landlords and tenants to work collaboratively to resolve issues, with and without assistance from the County. However, there are also equity and disparity issues regarding eviction that must also be considered and addressed. The Planning, Housing, and Economic Development (PHED) Committee has discussed the expected need for additional resources for services like legal

assistance, financial counseling, and assistance with working with landlords to negotiate payment or other agreements to address arrears.

While not all federal or state funding for housing assistance is fully flexible, organizations such as the National Alliance to End Homelessness (NAEH), have emphasized the need to target funds to those who are currently homeless and not stepping back from efforts to move people into permanent, stable housing – which is both a health issue and an equity issue. A short brief from NAEH is attached at © 18-19.

1. Homeless Crisis Response (Department of Health and Human Services)

Workgroup Mission: Identity and implement actions to maintain the safety and health of people experiencing homelessness. This includes drawing the connection between housing and healthcare. We recognize that providing people with a permanent home is the best way to prevent the spread of COVID-19. We also want to ensure that all policy decisions are made through an equity lens as black persons are disproportionately impacted by both COVID-19 and homelessness. Our work will be guided by best practices and the community's Strategic Plan to End Homelessness. We seek to provide recommendations and advocate for additional resources to achieve our goals.

Short-term Objectives:
- Identify actions needed to resume pre-COVID levels of service delivery in shelter and hotel.
- Identify alternative facilities to maintain overflow shelter capacity and adhere to CDC guidelines on social distancing.
- Create a plan for on-going testing at congregate shelter facilities.
- Review the ongoing need for isolation, quarantine spaces along with hotel spaces.
- Identify connections with other service areas in the County that is needed.
- Identify solutions from in-flow from other jurisdictions.

Intermediate Objectives:
- Develop a strategy for exiting people from hotel to permanent housing.
- Identify actions needed to rapidly exit people from shelter/ streets.

Long-term Objectives:
- Review data on those entering the homeless continuum from other systems (Inflow).
- Identify strategies to prevent inflow to homelessness from other systems of care including jails, residential rehab programs, hospitals, nursing facilities and group homes.
- Identify resources needed to increase year-round shelter capacity and eliminate the need for seasonal overflow shelter.
- Explore the growing need for drop-in services Up-County including food, showers, laundry.

2. Eviction & Homeless Prevention (Joint Department of Housing and Community Affairs and Department of Health and Human Services)

Workgroup Mission: Provide estimates of rental evictions based on delinquency distributions and estimates of landlord actions over 3, 6 and 12-month horizons, identifying potential for evictions to result in homelessness. Identify actions and policy options available to mitigate both evictions and events of homelessness, recommending actions and policies.

Short-term Objectives:
- Identify scale of rental delinquencies and estimates of potential evictions. (The team is conducting a survey to gain information from a representative group of property managers about rent delinquencies.)
- Develop mitigation options for connecting tenants to resources and landlord negotiation.
- Develop recommendations for best use of available and potential stabilization funds.

Intermediate Objectives:
- Determine potential for additional funding for housing stabilization and best uses.
- Determine predictive factors for risk of eviction and homeless, to target mitigation.
- Identify actions to prepare for significant increase in evictions and homelessness.

Long-term Objectives:
- Determine potential legislative / executive order options to reduce evictions.

Attached:

Council of Government's Point In Time Survey Executive Summary	© 1-4
Council of Government's Point In Time Survey	© 5-14
April 20, 2020 letter to County Executive	© 15-17
"Use ESG-CV to Help Those Currently Experiencing First" National Alliance to End Homelessness	© 18-19

EXECUTIVE SUMMARY

For the 20th consecutive year, the Metropolitan Washington Council of Governments (COG) Homeless Services Planning and Coordinating Committee has conducted a regional Point-in-Time (PIT) enumeration of the area's residents experiencing homelessness and those who were formerly homeless.

This year's enumeration and survey occurred on January 22, 2020. The report provides a one-night "snapshot" of the region's residents experiencing homelessness within nine metropolitan Washington area jurisdictions. It is important to note that this "snapshot," by definition, provides only one perspective on the state of homelessness in metropolitan Washington on only one night, and the count may be influenced by numerous variables, such as weather and bed availability by jurisdiction.

Impact of COVID-19

At the time the count was conducted, the impact of the pandemic caused by COVID-19 was not apparent within this region. It did not alter the methodology or results of the 2020 count. By the time the data were gathered and analyzed from the annual enumeration, however, the challenges facing people experiencing homelessness and those who are working to end their housing crisis had grown exponentially.

This report will not cover the significant needs that the metropolitan Washington's Continua of Care require to manage the public health crisis, but this year perhaps more than ever, it is apparent that **housing is health care.**

Findings, Highlights, and Trends from the 2020 Enumeration

LITERALLY HOMELESS COUNT

- The 2020 PIT enumeration resulted in a total count of **9,763 literally homeless individuals. This is the lowest number of persons counted experiencing homelessness since the region began coordinating in 2001, and the second year in a row that the literally homeless total has been below 10,000 persons.**

- The region's number of persons experiencing homelessness **decreased by 31 persons from 2019.**

This decrease is smaller than the decrease noted from 2018 to 2019 in last year's enumeration, but remains essentially unchanged on a percentage basis. Two of nine jurisdictions recorded decreases in the number of persons experiencing homelessness in 2020 from the 2019 count.

SHORT-TERM CHANGES IN THE HOMELESS ENUMERATION, 2019 TO 2020

- The District of Columbia had the greatest reduction in the number of persons experiencing homelessness from 2019 to 2020 (141 fewer persons), followed by Arlington County (16 fewer persons).

LONGER TERM CHANGES IN THE HOMELESS ENUMERATION, 2016 TO 2020

- **Seven of nine participating Continua of Care experienced a decline in the number of people experiencing homelessness between the 2016 and 2020 enumerations.**

- During the period from 2016 to 2020, the District of Columbia experienced the greatest reduction in persons experiencing homelessness, counting 1,970 fewer individuals. The District of Columbia also has the largest proportion of the region's residents experiencing homelessness (65 percent). Montgomery County had the second largest reduction between 2016 to 2020, with 311 fewer homeless persons counted, followed by Prince George's County (91 fewer persons) and Prince William County (74 fewer persons).

- Montgomery County reported the highest percentage reduction in its literally homeless count from 2016 to 2020 (32 percent).

VETERANS EXPERIENCING HOMELESSNESS

The region's count of veterans experiencing homelessness is essentially unchanged from 2019; there were three additional veterans on the night of the count from the previous year's enumeration.

- In 2020, the total number of veterans counted on the night of the PIT was 418, or three more individuals than were counted in 2019;

- The total number of veterans experiencing homelessness counted in 2020 has increased since its regional lowest count of 408 veterans in 2018, but remains below the number recorded during the PIT counts in 2016 and 2017; only two jurisdictions (Arlington County and Fairfax County) noted a decrease from 2019 to 2020, for a combined total of 16 fewer veterans counted.

- The District of Columbia recorded the greatest reduction in the number of veterans between 2016 and 2020 (48 fewer veterans counted), followed by Prince William County (12 veterans), and Frederick and Fairfax Counties (six and four fewer veterans respectively).

- The greatest percentage reduction between 2016 and 2020 was recorded by Frederick County (50 percent fewer veterans counted), followed by Prince William County (43 percent reduction) and Arlington County (40 percent reduction)[1].

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[1] It's important to note that these percentages are based on small total numbers; for example, in Frederick County, the 69 percent reduction is based on a difference of six individuals.

- Six of nine CoCs reduced the incidence of veteran homelessness since 2016, for a regional reduction of 14 percent.

CHRONICALLY HOMELESS

The trend noted for the number of persons counted as chronically homeless follows similar results, holding steady, as noted for other persons experiencing homelessness in 2020.

- Five of the nine participating jurisdictions experienced decreases in their chronically homeless single adult counts since 2016, and six Continua of Care recorded a decrease between the PIT counts of 2019 and 2020. Overall, the region counted 13 percent fewer single persons who were considered chronically homeless on the night of the enumeration between 2016 and 2020.

- The District of Columbia had the greatest reduction in the region in the number of chronically homeless single adults from 2016 to 2020 (164 fewer persons counted in 2020), followed by Montgomery County and the city of Alexandria, (135 and 32 fewer chronically homeless persons respectively).

- The jurisdiction with the greatest percentage reduction in chronically homeless single adults since 2016 is Montgomery County (93 percent for the second year in a row), followed by the city of Alexandria (68 percent) and Arlington County (51 percent).

Being able to intervene in other systems of care to prevent a housing crisis challenges the jurisdictions in the region from preventing a person from becoming chronically homeless. Persons seeking a permanent home may wait long enough to find housing they can afford that they eventually meet the U.S. Department of Housing and Urban Development's (HUD) definition for chronically homeless. It is a conundrum faced nationwide in communities with high housing costs and limited housing affordable to those with the lowest incomes.

FORMERLY HOMELESS

The number of individuals who are in permanent housing and no longer experiencing homelessness was double the number of people counted as literally homeless on the night of the annual enumeration. The region measured a decrease from 2019 to 2020 of four percent of the single individuals and persons in families who were counted in permanent housing on the night of the PIT and are no longer considered homeless, but have increased the regional total of persons who are formerly homeless by 30 percent since 2016.

In addition, in 2020:

- 7,306 formerly homeless individuals were rapidly re-housed;

- 11,425 formerly homeless persons were counted in Permanent Supportive Housing; and

- 3,563 formerly homeless persons were counted in other permanent housing.

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This brings the regional total of formerly homeless persons in 2020 to 22,294 additional people housed than at this time last year. The significant number of people placed in permanent housing has constrained the incidence of homelessness in the region and helped prevent it from growing unchecked.

CONCLUSION

Data collected this year confirm what each jurisdiction has observed in practice, that the single greatest barrier to ending homelessness in our communities is the insufficient number of affordable and available permanent housing opportunities for the lowest income households.

The 2020 report highlights several key, recurring themes:

1. The significant increase in the number of formerly homeless persons in permanent housing;
2. The positive impact of shelter diversion and homeless prevention programs;
3. The critical need to increase the supply of housing affordable to the lowest-income households and appropriate supportive resources.

Dedication to addressing the region's homelessness challenges has resulted in steady, measurable progress in providing shelter and wrap-around services to homeless individuals and families. The region should celebrate the achievements made to reduce the number of people counted experiencing homelessness in 2020. These reductions reflect the dedication and coordinated efforts of many to prevent people from entering the homeless system, to improve service delivery, and to increase permanent housing solutions. Reductions in chronically homeless and veteran subpopulations reflect focused efforts to ensure that the experience of homelessness is *brief, rare,* and *one time only.*

However, there remain significant challenges highlighted in this year's numbers. The challenges laid bare by the global pandemic caused by COVID-19 have highlighted the lifesaving protections that housing provides.

The successes reflected in the numbers in the report demonstrate that effective strategies are in place, but a sustained commitment to creating and adequately funding viable housing solutions for the lowest-income individuals and families, continuously improving data tracking and interpretation, and providing service paths to ensure successful housing placements are among the most critical components to making further significant reductions in the annual PIT. [2]

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[2] The map (following page) represents those jurisdictions which are members of COG. However, Charles County is not included in this Point-in-Time report. Unlike the other jurisdictions, Charles County provides its homelessness data to the Baltimore HUD Field Office.

Montgomery County, Maryland

DESCRIPTION OF HOMELESS SERVICES

The Montgomery County Homeless Continuum of Care (CoC) is a public-private partnership that includes state and local government agencies, non-profit service providers, landlords, and other stakeholders who have a role in preventing and ending homelessness. The Interagency Commission on Homelessness (ICH) serves as the CoC's governing board and the Services to End and Prevent Homelessness division of the Montgomery County Department of Health and Human Services is the Collaborative Applicant/ CoC Lead.

This year the ICH embarked on updating and revising the Montgomery County's strategic plan to end homelessness. This community-wide effort began in February 2019 and involved multiple stakeholders including elected officials, non-profit service providers, representatives from other systems of care, and government agencies. The final plan and action plan was launched in January 2020. Below are highlights from the strategic plan.

Vision: *We envision a home for everyone in Montgomery County, where the experience of homelessness is rare, brief, and one-time only.*

Mission: *Through commitment and collaboration, we will create effective systems in our community to achieve our vision. We strive to be a leader in the work to end homelessness across our nation.*

Bold Goals: *Montgomery County's strategic plan overarching goal is to ensure that by 2023 homelessness will be rare, brief, and one time only for everyone. In order to get there, Montgomery County will reach and maintain the following goals:*

- End homelessness among Veterans by 2015. - **Achieved!**
- End homelessness among chronically homeless individuals by 2019. - **Achieved!**
- End homelessness among families with children by the end of 2020.
- End homelessness among youth (ages 16-24) by the end of 2021.
- End homelessness among seniors by the end of 2022.
- End homelessness among everyone in Montgomery County by the end of 2023.

Values: *The values that guide the strategic plan efforts are as important as the strategies. Supporting the following core values will help to ensure that each person who interacts with the homeless services system is met with the highest standard of dignity and respect and receives the highest quality solutions*

- Housing First and Person-Centered Approaches
- Diversity, Equity, and Inclusion
- Collaboration Across the Continuum of Care
- Data and Results Based Decisions
- Continuous Change and Improvement

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Strategies: *The following six strategies will lead Montgomery County's efforts to end homelessness and achieve our population-specific bold goals.*

- Reduce Racial Disparities Across the System
- Build and Support Strong and Adaptable Programs
- Build and Support Affordable Housing Solutions within the Homeless Continuum
- Coordinate Effectively Across Other Systems of Care
- Increase and Diversify Funding
- Educate and Advocate for Change

A broad array of services is offered to help achieve the goals of the CoC including homeless prevention, diversion, street outreach, temporary shelter, shallow and deep housing subsidies, and supportive services.
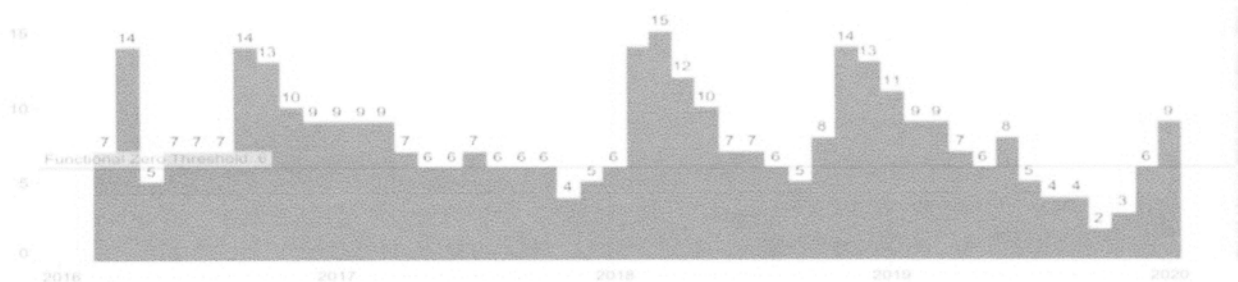
INITIATIVES

The work over the past year has been focused on the three current initiatives that are part of the *"Housing for All"* campaign:

- "Zero:2016" – Veterans Homelessness
- "Inside (Not Outside)" – Chronic Homelessness
- "At Home Together" – Family Homelessness

"Zero: 2016" Veterans Homelessness

In December 2015, Montgomery County was one of the first four jurisdictions in the Country to effectively end Veteran homelessness. This success was confirmed by the U.S. Department of Housing and Urban Development (HUD), the U.S. Interagency Council on Homelessness, and the Community Solutions *Built for Zero (BFZ)* campaign. We have housed more than 167 Veterans since the *Zero:2016* effort officially kicked off in June 2015 and only 5 % of them have returned to homelessness.

Actively Homeless Population

INS DE NOT OUTSIDE *Inside (not Outside) Initiative*

The Inside (not Outside) Initiative is Montgomery County's campaign to end chronic homelessness. In January 2016, Montgomery County CoC committed to the ambitious goal of ending long-term homelessness for people with disabilities. As of May 2020, 431 chronically homeless persons were housed through this initiative and 7 households are remaining to be housed. Although the CoC has not officially met the target for "functional zero", Montgomery County has consistently had less than 13 unhoused people identified as chronic since May of 2018. See the run chart below.

Actively Homeless Population Monthly count for Chronic subpopulations
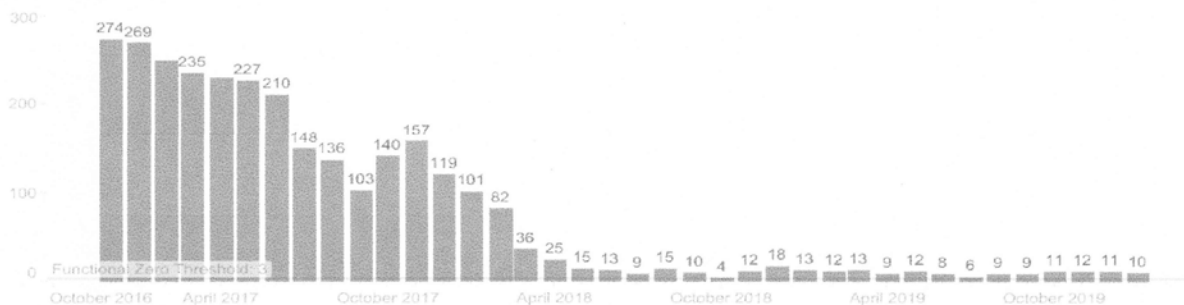
For nearly two years, the CoC has averaged only eleven chronically homeless individuals awaiting housing placement. This allowed the Coordinated Entry System to serve other vulnerable adults in permanent supportive housing and rapid rehousing. Since January 2019, Montgomery County has permanently ended homelessness for 201 vulnerable single adults in addition to those individuals meeting the federal definition of chronic homelessness. This is important, as it is no longer necessary for someone with very complex needs to have to remain homeless for twelve months before receiving housing placement. The County can move swiftly and reduce the length of time homelessness for very vulnerable people.

At Home Together

At Home Together Initiative

The At Home Together Initiative is Montgomery County's campaign to end and prevent homelessness for families with children. The CoC has committed to this bold goal and recognizes the need to intensify partnerships with other systems of care. Unlike the previous initiatives addressing Veteran and chronic homelessness, success is not defined by a "functional zero" number but instead by making the experience rare, brief, and one-time only. Montgomery County will measure success by reducing the length of time a family experiences homelessness, the number of households entering homelessness for the first time and rate of returns to homelessness for families with children. Since July 2018, 375 families have moved into permanent housing.

The strategies of the *@Home Together Initiative* include new and enhanced programs to better engage families early before they become homeless, and better targeted resources to provide rental assistance to families who are at risk of losing their housing. For families who enter the emergency
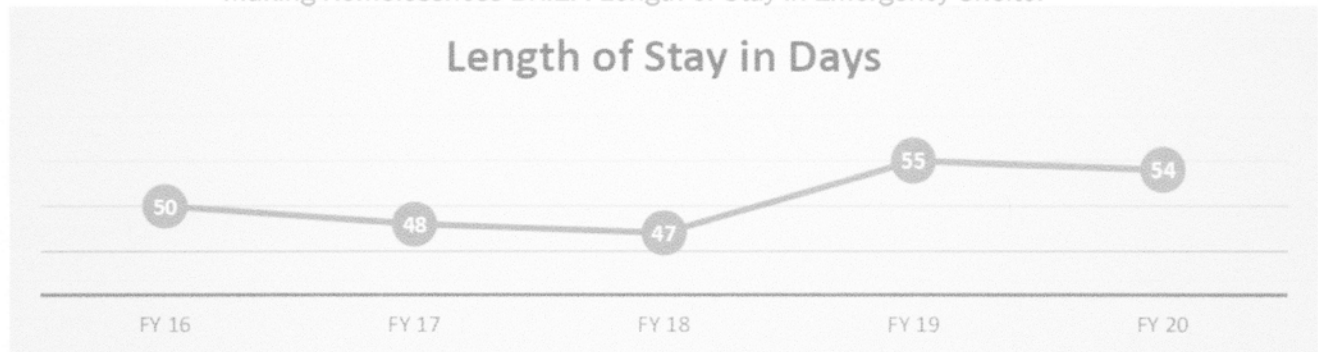
family shelter, there will be more integration between agencies to quickly connect to mainstream resources, employment, and affordable childcare. We believe ending homelessness is possible by providing the right amount of assistance to help families obtain or regain permanent housing quickly and ensuring access to services to help them remain stably housed.

Homelessness has significant and long-lasting adverse effects on children impacting their physical, social, and emotional growth and well-being. If we do not end homelessness for families with children, the result for the children is lower academic achievement, greater health issues, and more involvement with the child welfare system.
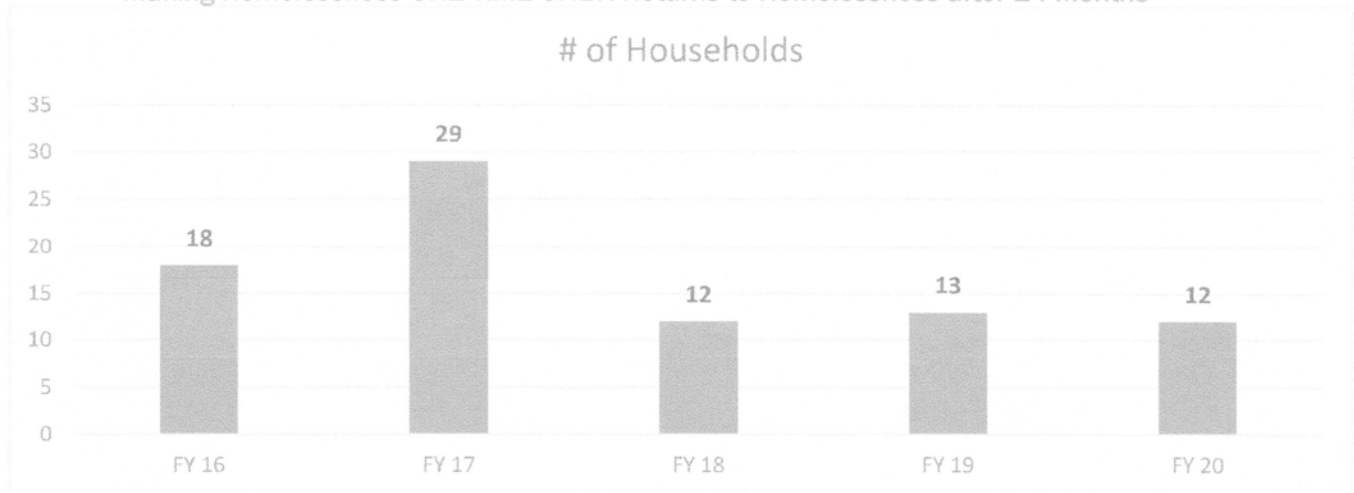
Making Homelessness RARE: Number of People in Families Experiencing Homelessness for the First Time

Making Homelessness BRIEF: Length of Stay in Emergency Shelter

Length of Stay in Days

of Households

Other Important Initiatives

For the past year, the CoC has been engaged in restructuring the Interagency Commission on Homelessness, the governing body of the CoC. This restructure included changes to membership to be more inclusive of critical stakeholders, redesign of the committee structure to distribute the workload, and the development of the "People's Committee" to ensure the voices of people with lived experience are heard. The People's Committee reports directly to the Interagency Commission on Homelessness and is currently engaged in making recommendations to amendments to emergency shelter contracts.

EMERGENCY SHELTER

The CoC continues to provide emergency shelter to households with minor children through three year-round family shelters, one domestic violence shelter, and limited hotel subsidies used as overflow. During hypothermia, additional overflow shelter is provided via a non-profit organization. During this year's enumeration, a total of 51 households with minor children were residing emergency, overflow shelter, or DV shelter which is a slight increase (1%) from 2019 and a 26% decrease from 2018.

Emergency shelter capacity for adults without children remains 140 for year-round capacity. This includes the DV shelter with 5 beds designated for this household type, 3 designated as medical beds, and 2 designated for older adults or people with disabilities. During hypothermia season from November 1 to March 31st, capacity expanded this year to 385 beds. On the day of the 2020 enumeration, there were 328 emergency shelter and overflow beds occupied: an increase of 10% from 2019 and 6% from 2018.

MONTGOMERY COUNTY'S YEAR-ROUND AND WINTER INVENTORY OF BEDS				
	Beds for Households w/o Children	Beds/Units for Households w/children	Total Year-Round Beds	Total Winter Beds
Hypothermia/Overflow/Other (Additional winter Capacity	245	65/18	0	310
Emergency Shelter Beds	140	138/43	278	0
Transitional / Safe Haven Beds	65	38/7	103	0
TOTALS	450	241/68	381	346

HOMELESS POINT-IN-TIME RESULTS

Montgomery County's homeless point in time survey was conducted on January 22, 2020. A total of 670 homeless persons were counted that day, an increase of 4% from 2019 and a decrease of 20% from 2018 count. Although there was an increase this year, the declining trend in homelessness over the last two years can be attributed to a population specific approach that seeks to connect households who become homeless to the most appropriate housing intervention, targeting prevention resources to those most likely to become homeless and engaging in homeless diversion or rapid exit from shelter for those households newly entering the system.

Households without children experienced a 10% increase in 2020 from 441 in 2019 to 487 in 2020. There was an increase of 37% in the number of unsheltered population, 75 in 2019 compared to 103 in 2020. This is still a decrease of 23% from the 2018 enumeration. In addition to the annual enumeration Montgomery County plans to conduct quarterly "head counts" of unsheltered persons to identify, engage, and track those experiencing street homelessness. The number of unsheltered individuals in trending upwards specifically in the more urban centers in the county.

The table below provides a comparison of the past 3 years.

Number of Unsheltered Individuals 2018-2020					
Category	2018	2019	2020	Percent Change 2018 to 2020	Percent Change 2019 to 2020
Total Number Counted	840	647	670	-20%	4%
Total Individuals	568	441	487	-14%	10%
Total Number of Families	86	61	60	-30%	-2%
Total Persons in Families	278	206	183	-34%	-11%
Total Adults in Families	93	76	70	-25%	-8%
Total Children in Families	185	130	113	-39%	-13%

The number of households with children headed by transition age youth (18-24 years old) decreased 36% from 11 in 2018 to 7 during the 2020 enumeration In July 2018, the CoC began implementing homeless diversion for families with children. Trends over the last two years suggest that nearly 2/3 of all households seeking shelter can resolve their housing crisis without needed emergency shelter. If the trend continues, the CoC will attribute the decline in transition age youth headed households with children to this change in practice. The number of unaccompanied transition age youth increased in 2020 to 31 (55%) from 2019. This increase is likely due to increased outreach and engagement with providers serving youth including a network of peer outreach workers.

MONTHLY INCOME AND EMPLOYMENT

Among all household types without children including those who are unsheltered, veterans, and transition age youth, 201 or 41% reported some type of monthly income. This is a decrease from 51% in 2019 and 50% in 2018. However, of those reporting monthly income 49% reported income from employment compared to 41% percent in 2019. The CoC has recognized the need to support homeless persons in obtaining eligible benefits. A total of 42% percent reported income from Social Security Retirement, Social Security or Veteran Disability, and/or Temporary Disability Assistance Program as their primary source of income. Montgomery County supports Housing First philosophy and though income is not required to be for permanent supportive housing or rapid rehousing, the CoC has made a concerted effort to connect homeless persons with vocational and employment supportive services. Additionally, emergency shelter staff are more focused on addressing the immediate barriers to housing such as income in their efforts to help individuals rapidly exit. Among households with children including veterans and transition age youth, the number of adults reporting monthly income was 47 (26%) which increased from 74% in 2019. In addition, 26 (55%) reported income from employment, which is an increase over the 2018 which was 39%. Still is likely attributed to the CoC's effort to increase housing interventions for families like rapid rehousing and
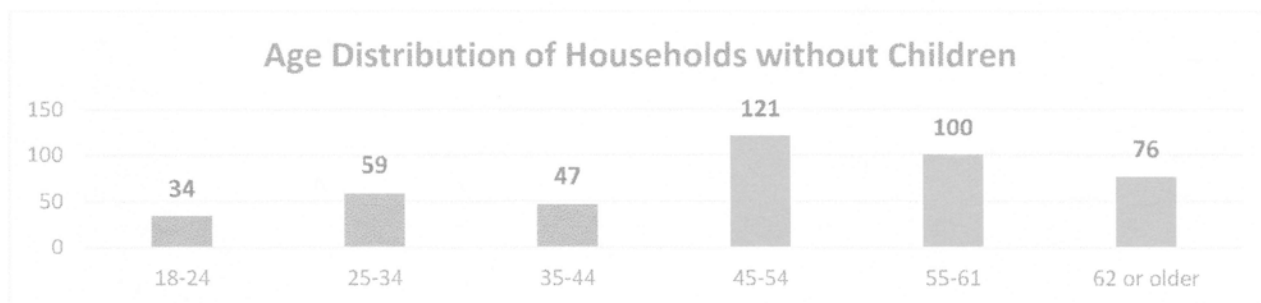
permanent supportive housing. Work force development has been identified as a gap in the CoC and must continue to be a priority for all household types. Employment specialist and vocational services are incorporated into Rapid Re-housing and permanent supportive housing contracts. The other primary source of income for households with families included Temporary Aide to Needy Families, Social Security Retirement, Social Security Disability / Survivor benefits which accounted for the income of 40% of this cohort.

SUBPOPULATIONS

Montgomery County saw declines in every subpopulation with two exceptions. The greatest decreases were with adults reporting dual diagnosis, limited English, and chronic health conditions. There was a 100% decrease in those reporting dual diagnosis and an 82% percent decrease in adults reporting chronic health problems. There was an 83% decrease in adults reporting limited English from the 2017 enumeration and a   45% decrease in adults reporting physical disability from 2017. Such significant declines can be attributed to full implementation of the Coordinated Entry System that prioritizes those households with the highest acuity for permanent housing.

	Adults Only in all Households FY18	Adults Only in all Households FY19	Adults Only in all Households FY20	Percent Change 2018 – 2020
Chronic Substance Abuse (CSA)	66	28	71	+8%
Severe Mental Illness (SMI)	170	126	123	-28%
Dual Diagnosis (CSA&SMI)	97	73	0	-100%
Chronic Health Problem	144	84	26	-82%
Living with HIV/AIDS	6	2	15	+150%
Physical Disability	110	136	61	-45%
Domestic Violence Victim History	147	106	35	-76%
Limited English	63	32	11	-83%
U.S. Veterans	13	13	12	-8%
Chronically Homeless	124	11	10	-92%

There continues to be an increasing number of older adults entering the homeless system. More than half (61%) of all adults without children are over 45 years old, 36% are over 55, and 17%, representing a 21% increase from 2019, are 62 years or older. Research states that people experiencing homelessness die an average of 30 years younger than the average person in the United States. This means that individuals with a history of homelessness age at an increased rate, so those 45 years old may have similar health issues as someone in their 70s.

Age Distribution of Households without Children

Age Group	Count
18-24	34
25-34	59
35-44	47
45-54	121
55-61	100
62 or older	76

Over the past three years, the number of persons fleeing domestic violence has decreased. This year there was a 54% decrease in the 2020 enumeration from 12 in 2020 to 26 adults in 2019 and 85% from 83 in 2018. The percent of adults reporting a history of domestic violence decreased by 76% since 2018. The CoC cannot attribute the changes to any specific reasons. The CoC continues to prioritize the limited scattered site transitional housing for DV households with minor children and undocumented households.

The number of persons experiencing chronic homelessness decreased by 92% from the 2018 enumeration. This decrease directly correlates to the efforts of the Inside (not Outside) initiative to end chronic homelessness. Since January 2016, Montgomery County has permanently ended homelessness for over 430 individuals. Regarding households with minor children, the County has monitored this closely and utilized permanent supportive housing options to re-house. Therefore, during this enumeration, there were no chronically homeless households with minor children.

Though Montgomery County achieved the goal of ending Veteran Homelessness in December 2015, sustaining functional zero requires continual monitoring and tracking. During the 2020 enumeration, 12 homeless veterans were counted. This is a slight decrease from the 2018 enumeration. To maintain functional zero, the CoC should average no more than 6 Veterans experiencing homelessness at any given time. As of May 1, 2020, 10 veterans are identified as homeless awaiting housing placement.

PERMANENT HOUSING

From 2017 to 2020, the number of units of permanent housing in Montgomery County has increased by 29% from 1138 to 1466. County officials remain committed to investing new local resources for permanent supportive housing, rapid rehousing, and shallow subsidies. As stated earlier, the CoC seeks to provide access to housing to all people experiencing homelessness. This requires creativity and an ability to leverage federal and state resources. Montgomery County continues to receive funding from the Maryland Department of Housing and Community Development and hopes to increase the amount in future years. Additionally, the Housing Opportunities Commission, the local public housing authority was awarded 99 new non-elderly disabled vouchers, resulting in 26 known homeless households being selected to receive a housing voucher. Lastly, SEPH continues to advocate for a revision to the County Rental Assistance Program to all for larger subsidies and more flexibility. Currently the program provides a maximum of $200 shallow subsidy for households with minor children, or households without minor children that have a disability or are at least 62+ years of age. Of the program participants, 42% are over 62 years of age.

RAPID RE-HOUSING

Montgomery County remains a high cost geographical area which poses challenges for households with minimal education and income to obtain and maintain housing without an on-going subsidy. Although Montgomery County has begun to increase the number of Rapid Rehousing slots, there is still a gap of approximately 300 units for both individuals and families according to the 2017 gap analysis of the CoC.

Beginning in August 2017, Montgomery County began a re-design of the RRH program from a fixed subsidy ($400 per month for singles, $600 per month for families) program to a flexible subsidy with re-evaluations of subsidy and need every ninety days. The program will also accept households with no income and work with them in obtaining temporary eligible benefits and on-going employment and pays the security deposit and first month rent to allow the family to transition from homelessness into stable housing. In coordination with the Learning Collaborative and the Coordinated Entry policy, the County has increased staffing to include a housing locator for landlord engagement and to develop a "housing stock". The goal is to serve more households more effectively by reducing the length of stay from 12 months to 4-6 months. Rapid rehousing has a success rate of 79% of households exiting to permanent housing.

PERMANENT SUPPORTIVE HOUSING AND OTHER PERMANENT HOUSING

Through the Inside (not Outside) Initiative, Montgomery County created more permanent supportive housing by increasing funding for the Housing Initiative Program (HIP). The program is unique in that the support services and reimbursement rates are based on acuity and change over time. By basing reimbursement rates on acuity, the program can serve more households more effectively. This allows providers to increase or decrease services depending on need.

In the 2018 HUD Continuum of Care Competition, Montgomery County was awarded $538,250 for a new permanent supportive housing program to serve 21 adults with chronic substance use. In addition, Montgomery County applied to the State of Maryland Assistance in Community Integration Services (ACIS) Pilot. The 1115 Medicaid Waiver allows states to bill Medicaid for housing support services including pre-tenancy supports and housing case management. Montgomery County has been approved to provide services to 110 individuals in permanent supportive housing and rapid rehousing programs. This additional resource has allowed the County to reinvest the savings from supportive services into housing subsidies and increase the stock of permanent housing. Finally, Montgomery County received an additional $1 million in funding for FY20 to increase the number of permanent supportive housing units by 40.
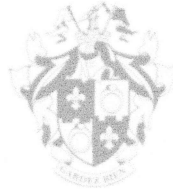
April 20, 2020

County Executive Marc Elrich
101 Monroe Street
Rockville, MD 20850

Dear County Executive Elrich:

Thank you for your ongoing efforts during this time of crisis. As we hear from constituents about their growing concerns, being able to stay in their homes is among the top of their list.

Prior to the COVID-19 pandemic, the Council stated that housing security was a central goal for all of our residents. Housing insecurity is especially acute for Montgomery County renters, who make on average 70% of the area median income and half of whom are cost burdened, notwithstanding the current economic climate. While the statewide eviction moratorium is temporarily helpful for some renters, we must also increase direct housing assistance and expand the qualifications for existing County housing programs so that more Montgomery County residents are able to recover from this economic crisis and its lasting effects.

As you know, thousands of Montgomery County families do not qualify for federal or state financial assistance and these households are disproportionately renters. Once the current eviction moratorium is lifted, households that have been unable to pay rent will still be vulnerable to displacement.

To mitigate the current crisis and prepare for the reality that is ahead, we are recommending a four-part solution:

1. Put in place temporary administrative changes to expand eligibility standards for rental assistance programs, such as the Housing Stabilization Fund and Emergency Eviction Assistance Program. Accessing housing assistance programs should be simplified and

streamlined during this crisis. This includes waiving requirements, such as eviction and court orders, and expanding the qualifications to be more inclusive of those financially impacted by COVID-19.

2. Support an initial $2 million supplemental to cover the expected demand from expanding qualifications for eviction prevention, housing stabilization and rapid rehousing; in addition to providing temporary rental assistance to additional households by modifying the income requirements, and allowing assistance grants more than once in a 12 month period.

3. Leverage private sector investment and partnerships with landlords to ensure that renters have a six month transition after the emergency evictions are lifted.

4. Establish a multilingual hotline within the Housing Stabilization Unit. As you know, this unit has three regional offices, with three different points of entry, and the cultural and linguistic proficient services offered at each of these three offices is not always consistent. We have received feedback from nonprofit organizations and County Council staff who have had a difficult time accessing services on behalf of non-English dominant constituents. Therefore, establishing a multilingual hotline with Spanish as the main language, and other languages as needed, will ensure that language is not a barrier for constituents who need information and access to the vital services that this Unit provides.
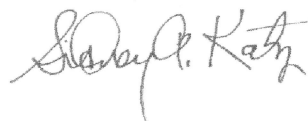
As the next rent due date of May 1 is right around the corner, we ask that you move swiftly in ensuring that these expanded guidelines and rental assistance are immediately available to renters impacted by COVID-19 financial losses.

Renter households now make up close to 40% of county residents and in many parts of the county are a majority of the population. This year the County Council unanimously committed to the Council of Governments' affordable housing goals and we have committed to reducing the waitlists for our housing programs by increasing funding to the Housing Initiative Fund. While we recognize the need for residents to apply for unemployment, this targeted approach helps the county efficiently leverage resources fulfilling our affordable housing obligations has never been more important. We look forward to working with you on this issue.

Sincerely,

Evan Glass
Councilmember, At-Large

Sidney Katz
President

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Tom Hucker
Vice President

Gabe Albornoz
Councilmember, At-Large

Craig Rice
Councilmember, District 2

Nancy Navarro
Councilmember, District 4

Will Jawando
Councilmember, At-Large

Hans Riemer
Councilmember, At-Large

Andrew Friedson
Councilmember, District 1

Use ESG-CV to Help Those Currently Experiencing Homelessness First

Written by NAEH June 10, 2020

To protect people experiencing homelessness during the COVID-19 pandemic, Congress appropriated $4 billion for the Emergency Solutions Grant program via the CARES Act (ESG-CV). This is an enormous investment (approximately 17 times the usual annual ESG appropriation) that has the potential to help countless people exit homelessness and stay safer and healthier during the pandemic — but only if it is efficiently and effectively targeted. And that means a focus on those who are already homeless.

ESG should be preserved for people currently experiencing homelessness.

Now that the entire $4 billion of ESG-CV funding has been released, grantees will be considering how to use it, including how much to invest in helping people who are already homeless versus preventing homelessness. Experience and evidence give us a straightforward answer. If you want to seize some benefit from this devastating public health emergency, you should first use these funds to help all the people currently experiencing homelessness get into safe temporary housing, and then permanent housing and connected with services. Only when all are homeless people are housed, should you consider prevention with this funding stream. This is both because people who are literally homeless are at the highest risk from the disease AND because homelessness prevention programs are notably ineffective at preventing homelessness because of the difficulty of predicting who will actually become homeless.

Eviction prevention and homelessness prevention are not the same thing.

Homelessness prevention is most frequently delivered as eviction assistance. It is a common misconception that a good way to prevent homelessness is to prevent eviction for people who are assumed will probably become homeless if they lose their housing (people who are low income and have an eviction notice). But most of the time, this is not actually true.

Traditional low-income eviction prevention programs tend to assist households with very little risk of ever entering shelter in the first place. A Chicago study, for example, found that of low-income households with eviction notices, who had applied for eviction assistance but did not receive it due to insufficient funding, only 2.1% later entered a homeless shelter program. Being very low income and having an eviction notice does not predict homelessness.

Further, very few households that do become homeless come from a home in which they were the leaseholder. By far the largest percentage of people who enter homelessness do so from a doubled-up situation in which they are not the leaseholder.

While eviction prevention does not reliably prevent homelessness, it is important and helps stabilize people in housing. **Eviction prevention** can and should be funded by mainstream

system resources, including CDBG, TANF (for families), the Coronavirus Relief Fund, etc. Resources in the HEROES Act (proposed by the US House of Representatives) could also make a significant contribution. It should not, however, be the focus of ESG-CV funds targeted to address homelessness.

Focusing on those currently homeless addresses racial equity.

People of color who experience homelessness, particularly African Americans, often have more complex problems as a result of having been the target of historic and systemic racism. As a result of discrimination, they have had disproportionate interaction with the criminal justice system, less access to quality health care, more involvement in the child welfare system, poorer health, less access to quality and healthful food, poorer educations, less job opportunity and advancement, etc.

Targeting people with lesser needs for homelessness prevention/eviction assistance can result in those with more complex problems going un-served and further perpetuate racial disparities in homelessness. To be more equitable with respect to race, higher-need people must not be overlooked or de-prioritized.

Conclusion

With the $4 billion in new ESG-CV resources, states and localities have an unprecedented opportunity to help people experiencing homelessness stay safe from acquiring or transmitting COVID-19, while also receiving the support they need to escape homelessness and position themselves for the recovery period. If these resources are significantly devoted to prevention of homelessness through eviction assistance – which data show rarely ends homelessness – this opportunity will be lost, and people's lives will be put at risk. Therefore, where there are still people experiencing homelessness, ESG-CV funding should be used to ensure their safety and end their homelessness, rather than for broader prevention initiatives, including eviction prevention.